

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

CAMPAIGN FOR WORKING FAMILIES

ADDRESS (number and street)

2800 Shirlington Road, Suite 930

☐Check if different  
than previously  
reported. (ACC)

Arlington

VA

22206

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00325076

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☒

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

08

01

2010

through

08

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Dorie Velezis

Signature of Treasurer

Electronically Filed by Dorie Velezis

Date

10

08

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name  
CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	1942798.34
(b) Cash on Hand at Beginning of Reporting Period .....	2083387.41	
(c) Total Receipts (from Line 19) .....	25515.58	460953.93
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	2108902.99	2403752.27
7. Total Disbursements (from Line 31) .....	28881.89	323731.17
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	2080021.10	2080021.10
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	916.84	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	2544.01	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period:

From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	10930.00	233500.24
(ii) Unitemized .....	5030.93	144249.03
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	15960.93	377749.27
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	15960.93	377749.27
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	437.00	648.28
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	242.65	11556.38
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	8875.00	71000.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	8875.00	71000.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	25515.58	460953.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	16640.58	389953.93

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	8875.00	70750.00	
(ii) Non-Federal Share.....	8875.00	70750.00	
(b) Other Federal Operating Expenditures.....	9131.89	135632.06	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	26881.89	277132.06	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	30500.00	
24. Independent Expenditure (use Schedule E) .....	0.00	8549.11	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	5550.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	5550.00	
29. Other Disbursements.....	0.00	2000.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	28881.89	323731.17	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20006.89	252981.17	

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	15960.93	377749.27
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	5550.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15960.93	372199.27
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	18006.89	206382.06
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	437.00	648.28
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	17569.89	205733.78

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

MR CHARLES D AYRES

Mailing Address 4911 CASA ORO DR

City

YORBA LINDA

State

CA

Zip Code

92886

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.44604

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

DAVID BAIN

Mailing Address 1000 PECAN DR

City

MCKINNEY

State

TX

Zip Code

75069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CORWIN ENGINEERING INCORP-  
ORATEDOccupation  
ENGINEER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.44554

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS JUDITH BIRDSEYE

Mailing Address 15816 197TH PL NE

City

WOODINVILLE

State

WA

Zip Code

98077

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFO REQUESTED- NOT RECDOccupation  
INFO REQUESTED- NOT RECD

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.44626

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) .....

200.00

TOTAL This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0103804-0000190  
Transaction ID : **SA11AI.44604**

B. Form/Schedule : **SA11AI** 0104630-0000138  
Transaction ID : **SA11AI.44554**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44626**

0107438-0000214



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

DR GARY R BISHOP

Mailing Address 15144 LARRY ST

City

POWAY

State

CA

Zip Code

92064

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RIVERSIDE COUNTY

Occupation

PHARMACIST

Receipt For: 2010

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	5	/	2	0	1	0

Transaction ID: SA11AI.44590

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

MR KENNETH N BLACKBURN

Mailing Address 10 SHALLOWBROOK DR

City

O FALLON

State

IL

Zip Code

62269

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AIRTRAN AIRWAYS

Occupation

PILOT

Receipt For: 2010

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	7	/	2	0	1	0

Transaction ID: SA11AI.44535

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MS ANGELYN BLANCHARD

Mailing Address 3025 HARTLEY DR

City

SANTA ROSA

State

CA

Zip Code

95405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

PRIVATE TEACHER

Receipt For: 2010

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	8	/	2	0	1	0

Transaction ID: SA11AI.44615

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) .....

160.00

TOTAL This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.44590**

0009108-0000173

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.44535**

0014063-0000118

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44615**

0103906-0000202

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR RONALD J BOOMSTRA

Mailing Address 585 BIRCHWOOD ST

City

JACKSON

State

MI

Zip Code

49203

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED MILITARY

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.44506

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

MR TERRY O BRISTOL

Mailing Address 344 E FOOTHILLS PKWY  
RED ROOM 9-W

City

FORT COLLINS

State

CO

Zip Code

80525

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
344E FOOTHILLS PARKWAY FC  
COLORADO

Occupation

ASSET MGR

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.44573

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MR DEL C BROOKS

Mailing Address 12789 MUIRFIELD BLVD N

City

JACKSONVILLE

State

FL

Zip Code

32225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SMURFIT STORE CONT. CORP

Occupation

GEN MGR

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.44461

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0025974-0000088  
Transaction ID : **SA11AI.44506**

B. Form/Schedule : **SA11AI** 0024811-0000157  
Transaction ID : **SA11AI.44573**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44461**

0012784-0000039

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR WENDELL BROWN

Mailing Address 300 N FILLMORE ST

City

ARLINGTON

State

VA

Zip Code

22201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BE SERVICES

Occupation

ACCOUNTANT

Receipt For:

2010

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.44440

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MR WILLIAM P BUCK, JR

Mailing Address 2084 BROOK HIGHLAND RDG

City

BIRMINGHAM

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNIVERSITY OF ALABAMA

Occupation

MOM

Receipt For:

2010

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.44467

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MRS G ELLENE BUSBY

Mailing Address 170 E CONNECTICUT AVE

City

SOUTHERN PNES

State

NC

Zip Code

28387

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

2010

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.44449

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

225.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0107255-0000018  
Transaction ID : **SA11AI.44440**

B. Form/Schedule : **SA11AI** 0101854-0000044  
Transaction ID : **SA11AI.44467**



C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44449**

0003053-0000027

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR GORDON CHAN

Mailing Address 1023 NE 98TH ST

City

SEATTLE

State

WA

Zip Code

98115

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NORTHWEST HOSP

Occupation

C. T. TECHNOLOGIST

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.44627

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MR C DAN CHENOWETH

Mailing Address 5515 W RICHEY RD

City

HOUSTON

State

TX

Zip Code

77066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TWSCO INC

Occupation

CHAIRMAN

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.44567

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MRS Z IDELE COLLINS

Mailing Address PO BOX 849

City

SHADY COVE

State

OR

Zip Code

97539

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOUSEWIFE

Occupation

HOUSEWIFE

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.44624

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1150.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0032286-0000215  
Transaction ID : **SA11AI.44627**

B. Form/Schedule : **SA11AI** 0104559-0000151  
Transaction ID : **SA11AI.44567**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44624**

0020678-0000211

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS DOREEN J DEBLIEK

Mailing Address 5523 WOODVIEW PASS

City

MIDLAND

State

MI

Zip Code

48642

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.44504

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

MR LEONARD A DEO

Mailing Address 2 SYLDEO DR

City

PARSIPPANY

State

NJ

Zip Code

07054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FLOWERS & GIFTS- INC.

Occupation  
FLORIST

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.44427

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MR CRAIG W EGLOFF

Mailing Address 27001 HIGHWAY 128

City

YORKVILLE

State

CA

Zip Code

95494

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JAYMES & JAYMES

Occupation  
INSURANCE BROKER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.44616

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.44504**

0072207-0000086

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.44427**

0001536-0000005

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44616**

0101847-0000203

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR JAMES S ENGLUND

Mailing Address 302 CINDI CT

City

LONGVIEW

State

TX

Zip Code

75605

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
ENGINEER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

901.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.44558

Amount of Each Receipt this Period

700.00

**B.**

Full Name (Last, First, Middle Initial)

MR CARL M FRANZELLA

Mailing Address 2329 SEVERN AVE

City

METAIRIE

State

LA

Zip Code

70001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SUN INTERIORS

Occupation  
PRESIDENT

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.44544

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR JERRY GOULDING

Mailing Address PO BOX 8173

City

TRUCKEE

State

CA

Zip Code

96162

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED BUILDING CONTRACTOR

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.44618

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

900.00

**TOTAL** This Period (last page this line number only) .....



A. Form/Schedule : **SA11AI** 0014348-0000142  
Transaction ID : **SA11AI.44558**

B. Form/Schedule : **SA11AI** 0104367-0000129  
Transaction ID : **SA11AI.44544**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44618**

0103452-0000205

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS PHYLLIS L GUNTER

Mailing Address 12939 JULINGTON RIDGE DR E

City

JACKSONVILLE

State

FL

Zip Code

32258

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFO REQUESTED- NOT RECD

Occupation

INFO REQUESTED- NOT RECD

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.44462

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

MRS PHYLLIS L GUNTER

Mailing Address 12939 JULINGTON RIDGE DR E

City

JACKSONVILLE

State

FL

Zip Code

32258

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFO REQUESTED- NOT RECD

Occupation

INFO REQUESTED- NOT RECD

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.44463

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

MRS CARL W GUSTKE

Mailing Address 233 STATON RD

City

CABOT

State

AR

Zip Code

72023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FEDERAL EX - (WIFE) REBSA-  
MEN R. H.

Occupation

PILOT - WIFE DEBORAH-RN

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.44548

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

110.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0107460-0000040  
Transaction ID : **SA11AI.44462**

B. Form/Schedule : **SA11AI** 0107460-0000041  
Transaction ID : **SA11AI.44463**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44548**

0022519-0000132

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS DIANA E HULL**

Mailing Address **3000 LEWIS RD**

City State Zip Code  
**RIVERTON WY 82501**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF**

Occupation  
**SELF EMPLOYED**

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**400.00**

Date of Receipt

**08 / 19 / 2010**

**Transaction ID: SA11AI.44575**

Amount of Each Receipt this Period

**100.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR CARY HUMPHRIES**

Mailing Address **8 N SAGEBRUSH ST**

City State Zip Code  
**WICHITA KS 67230**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CARGILL INC.**

Occupation  
**HOMEMAKER AND BUSINESS**

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt

**08 / 12 / 2010**

**Transaction ID: SA11AI.44542**

Amount of Each Receipt this Period

**1000.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR FLOYD R JUMP, TTE**

Mailing Address **350 E HENSCHEN ST**

City State Zip Code  
**GARNER IA 50438**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt

**08 / 30 / 2010**

**Transaction ID: SA11AI.44512**

Amount of Each Receipt this Period

**100.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**1200.00**

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0008315-0000159  
Transaction ID : **SA11AI.44575**

B. Form/Schedule : **SA11AI** 0101787-0000126  
Transaction ID : **SA11AI.44542**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44512**

0103497-0000095



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

DR JOHN D KEISLING

Mailing Address 35 ERICA LN

City

BELEN

State

NM

Zip Code

87002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SAIC

Occupation  
SCIENTIST

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.44582

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

MR H KERKSTRA

Mailing Address 1711 TOURS CT

City

BAKERSFIELD

State

CA

Zip Code

93311

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.44610

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

MRS CAROLYN C KINDER

Mailing Address 4212 KEEPSAKE CT

City

MODESTO

State

CA

Zip Code

95356

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DIALYSIS CENTER

Occupation  
RENAL DICTITIAN

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.44614

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional) .....

175.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0100128-0000165  
Transaction ID : **SA11AI.44582**

B. Form/Schedule : **SA11AI** 0103362-0000196  
Transaction ID : **SA11AI.44610**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44614**

0013787-0000201

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR ROBERT L KOLES

Mailing Address 1300 N 130TH AVE

City

FALL CREEK

State

WI

Zip Code

54742

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.44523

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

MR ROBERT LAKE

Mailing Address 2721 18TH ST

City

BAKERSFIELD

State

CA

Zip Code

93301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WESTERN OILFIELDS SUPPLY  
CO

Occupation  
CFO

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.44608

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MR ROBERT LAKE

Mailing Address 2721 18TH ST

City

BAKERSFIELD

State

CA

Zip Code

93301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WESTERN OILFIELDS SUPPLY  
CO

Occupation  
CFO

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.44609

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

175.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0012882-0000106  
Transaction ID : **SA11AI.44523**

B. Form/Schedule : **SA11AI** 0009387-0000194  
Transaction ID : **SA11AI.44608**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44609**

0009387-0000195

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS SHERRILL A LARSON

Mailing Address 13510 BRAEMAR DR

City

ELM GROVE

State

WI

Zip Code

53122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MED COLLEGE OF NI

Occupation

HOMEMAKER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.44519

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MRS JOAN K LAUTENSCHLEGE

Mailing Address 24621 CHARLTON DR

City

LAGUNA HILLS

State

CA

Zip Code

92653

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 1 0

Transaction ID: SA11AI.44600

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

MR STEVE J LIPPERT

Mailing Address 6829 JENNIFER LYNN DR

City

CINCINNATI

State

OH

Zip Code

45248

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HAMILTON CASTER & MFG. CO.

Occupation

BUSINESS

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.44485

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1400.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0038115-0000102  
Transaction ID : **SA11AI.44519**

B. Form/Schedule : **SA11AI** 0107445-0000184  
Transaction ID : **SA11AI.44600**



C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44485**

0104594-0000064

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MAJ JAMES P LUKE

Mailing Address 4273 BRISTOL DR

City

DAYTON

State

OH

Zip Code

45440

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USAF

Occupation

INFO REQUESTED- NOT RECD

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.44490

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

SHANNON MCGINLEY

Mailing Address 4 BALSAM CT

City

BEDFORD

State

NH

Zip Code

03110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.44426

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

MAE L MCKINLEY

Mailing Address 515 11TH AVE NE

City

MINOT

State

ND

Zip Code

58703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.44530

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

130.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0101785-0000071  
Transaction ID : **SA11AI.44490**

B. Form/Schedule : **SA11AI** 0105687-0000004  
Transaction ID : **SA11AI.44426**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44530**

0101794-0000113

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

DR DAVID MORRISON

Mailing Address 1802 CROOM DR

City

MONTGOMERY

State

AL

Zip Code

36106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

PHYSICIAN

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.44469

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

MRS ARTHA M NEUENFELDT

Mailing Address 637 ROBINSON RD

City

JACKSON

State

MI

Zip Code

49203

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.44508

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

EDWARD M NICHOLS

Mailing Address 555 TAXTER RD

City

ELMSFORD

State

NY

Zip Code

10523

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FUSION FINANCIAL GROUP

Occupation

FINANCIAL PLANNER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.44430

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

265.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0003940-0000046  
Transaction ID : **SA11AI.44469**

B. Form/Schedule : **SA11AI** 0103940-0000091  
Transaction ID : **SA11AI.44508**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44430**

0104421-0000008

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)  
EDWARD M NICHOLS

Mailing Address 555 TAXTER RD

City State Zip Code  
ELMSFORD NY 10523

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
FUSION FINANCIAL GROUP

Occupation  
FINANCIAL PLANNER

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.44431

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)  
MRS DOROTHY F OLIVER

Mailing Address 5201 GLADSTONE ST

City State Zip Code  
LINCOLN NE 68504

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
BACK TO THE BIBLE

Occupation  
RETIRED

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.44543

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR JAY R OWEN

Mailing Address 35 CYPRESS MARSH DR

City State Zip Code  
HILTON HEAD ISLAND SC 29926

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ENGINEERED SYSTEMS

Occupation  
ENGINEER

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.44452

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

200.00

**TOTAL** This Period (last page this line number only) .....



A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.44431**

0104421-0000009

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.44543**

0071878-0000128

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44452**

0031336-0000030

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS JOANNE M SCHROEDER

Mailing Address 15720 52ND AVE N

City

PLYMOUTH

State

MN

Zip Code

55446

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NORTHWESTERN COLLEGEOccupation  
CFO

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	1	0

Transaction ID: SA11AI.44517

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MR GARY J SELF

Mailing Address 8508 YORKSHIRE DR

City

ORANGE

State

TX

Zip Code

77632

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WAL-MARTOccupation  
PHARMACIST

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	0

Transaction ID: SA11AI.44569

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

MR PAUL V SERENIUS

Mailing Address 321 VILLAGE SQUARE DR

City

CENTERVILLE

State

OH

Zip Code

45458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	0

Transaction ID: SA11AI.44491

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

170.00

TOTAL This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0105676-0000100  
Transaction ID : **SA11AI.44517**

B. Form/Schedule : **SA11AI** 0013298-0000153  
Transaction ID : **SA11AI.44569**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44491**

0104852-0000072

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR RANDALL SKOV

Mailing Address 115 TALL TIMBER CT

City

FAYETTEVILLE

State

GA

Zip Code

30215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US AIR FORCE

Occupation

WEATHER OFFICER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.44454

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MRS DEBORAH E SMITH

Mailing Address 3360 E TERRELL BRANCH CT SE

City

MARIETTA

State

GA

Zip Code

30067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.44453

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

DR WILLIAM H SMITH

Mailing Address PO BOX 203

City

KAAAWA

State

HI

Zip Code

96730

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STATE OF HAWAII

Occupation

TEACHER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.44619

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

125.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0014942-0000032  
Transaction ID : **SA11AI.44454**

B. Form/Schedule : **SA11AI** 0027760-0000031  
Transaction ID : **SA11AI.44453**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44619**

0103927-0000206



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MS LONETTE SOLIS

Mailing Address 1909 BUCKTHORN LN

City

RESTON

State

VA

Zip Code

20191

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NORTHROP GRUMMAN

Occupation

ADMINISTRATIVE ASSISTANT

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.44438

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MR PATRICK A SPRUNGER

Mailing Address 5915 HEYWOOD CV

City

FORT WAYNE

State

IN

Zip Code

46815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SIMPLEX

Occupation

GEN MGR

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.44495

Amount of Each Receipt this Period

225.00

**C.**

Full Name (Last, First, Middle Initial)

MRS TAMMY E STEINBERG

Mailing Address 101 WINDINGHAM DR NW

City

HUNTSVILLE

State

AL

Zip Code

35806

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HARRO APOTHERAPY

Occupation

HOMEMAKER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.44468

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

295.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0103894-0000016  
Transaction ID : **SA11AI.44438**

B. Form/Schedule : **SA11AI** 0004939-0000076  
Transaction ID : **SA11AI.44495**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44468**

0011951-0000045

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR FRED T STIMPSON, III

Mailing Address PO BOX 1663

City

MOBILE

State

AL

Zip Code

36633

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GULF LUMBER CO INC

Occupation  
PRESIDENT

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.44470

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

MR MARK SWISHER

Mailing Address 24902 N POINT PL

City

KATY

State

TX

Zip Code

77494

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AVIARA ENERGY CORPORATION

Occupation  
ENGINEER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.44568

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MR CLIFFORD F TRACY

Mailing Address 18747 SAN FELIPE ST

City

FOUNTAIN VALLEY

State

CA

Zip Code

92708

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.44602

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0099571-0000048  
Transaction ID : **SA11AI.44470**

B. Form/Schedule : **SA11AI** 0048257-0000152  
Transaction ID : **SA11AI.44568**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44602**

0100452-0000187

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR RICHARD V TREAKLE

Mailing Address 510 PINE LN

City

LOS ALTOS

State

CA

Zip Code

94022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.44613

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

MRS JEAN R WARD

Mailing Address PO BOX 251

City

PALM DESERT

State

CA

Zip Code

92261

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.44592

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MR JIMMY D WARREN

Mailing Address 155 ALAMEDA DR

City

MERRITT ISLAND

State

FL

Zip Code

32952

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFO REQUESTED- NOT RECD

Occupation  
INFO REQUESTED- NOT RECD

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.44464

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional) .....

790.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0100441-0000199  
Transaction ID : **SA11AI.44613**

B. Form/Schedule : **SA11AI** 0084060-0000175  
Transaction ID : **SA11AI.44592**



C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44464**

0102819-0000042

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS DONALD A WHITE, JR

Mailing Address 9412 ROCKY HILLS DR

City

CORDOVA

State

TN

Zip Code

38018

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.44476

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MR TIM WINN

Mailing Address 3325 CAMINO VALLAREAL

City

ESCONDIDO

State

CA

Zip Code

92029

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

TRUSTEE

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.44589

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

MS JANICE E WOOD

Mailing Address 3946 HOLLADAY PARK LOOP SE

City

LACEY

State

WA

Zip Code

98503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

RETIRED TEACHER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.44630

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional) .....

1080.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0101707-0000054  
Transaction ID : **SA11AI.44476**

B. Form/Schedule : **SA11AI** 0104948-0000171  
Transaction ID : **SA11AI.44589**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44630**

0101762-0000218

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

JUNE L ZEIGLER

Mailing Address 2261 WARREN DR

City

MORRISTOWN

State

TN

Zip Code

37814

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.44473

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

10930.00

A. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.44473**

0098488-0000051

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 85

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

U.S. POSTMASTER

Mailing Address MAIN POST OFFICE

City

WASHINGTON

State

DC

Zip Code

20000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

613.28

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 9 / 2 0 1 0

Transaction ID: SA15.44668

Amount of Each Receipt this Period

437.00

REFUND BRE POSTAGE FEES

**SUBTOTAL** of Receipts This Page (optional) .....

437.00

**TOTAL** This Period (last page this line number only) .....

437.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 85

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

BB&T

Mailing Address P.O. Box 580363

City

Charlotte

State

NC

Zip Code

28258

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1645.89

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 1 / 2 0 1 0

Transaction ID: SA17.44665

Amount of Each Receipt this Period

242.65

INTEREST INCOME

**SUBTOTAL** of Receipts This Page (optional) .....

242.65

**TOTAL** This Period (last page this line number only) .....

242.65



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 73 / 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

<b>A.</b> Full Name (Last, First, Middle Initial) American Express	<b>Transaction ID:</b> SB21B.44632 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 981540	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	2		2	0	1	0												
City El Paso State TX Zip Code 79998	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement BANK FEES	<table border="1"> <tr> <td>4</td><td>9</td><td>5</td> </tr> </table>	4	9	5																	
4	9	5																			
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) American Express	<b>Transaction ID:</b> SB21B.44634 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 981540	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	7		2	0	1	0												
City El Paso State TX Zip Code 79998	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement BANK FEES	<table border="1"> <tr> <td>3</td><td>2</td><td>2</td><td>.</td><td>8</td><td>8</td> </tr> </table>	3	2	2	.	8	8														
3	2	2	.	8	8																
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) American Express	<b>Transaction ID:</b> SB21B.44635 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 981540	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	7		2	0	1	0												
City El Paso State TX Zip Code 79998	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement BANK FEES	<table border="1"> <tr> <td>0</td><td>9</td><td>6</td> </tr> </table>	0	9	6																	
0	9	6																			
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**328.79**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 74 / 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

Authorize.net

Mailing Address 808 East Utah Valley Drive

City  
American ForkState  
UTZip Code  
84003Purpose of Disbursement  
BANK FEES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.44633

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	0

Amount of Each Disbursement this Period

57.53

**B.**

Full Name (Last, First, Middle Initial)

CHOI COMPANIES

Mailing Address 5999 STEVENSON AVE #310

City  
ALEXANDRIAState  
VAZip Code  
22304Purpose of Disbursement  
RENT

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.44655

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	1	0

Amount of Each Disbursement this Period

2756.00

**C.**

Full Name (Last, First, Middle Initial)

COVAD COMMUNICATIONS

Mailing Address P.O. BOX 39000

City  
SAN FRANCISCOState  
CAZip Code  
94139Purpose of Disbursement  
COMPUTER SERVICE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.44638

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	3		2	0	1	0

Amount of Each Disbursement this Period

104.45

SUBTOTAL of Disbursements This Page (optional) .....

2917.98

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 75 / 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)  
FEDERAL EXPRESS

Mailing Address P.O. BOX 1140

City State Zip Code  
MEMPHIS TN 38101

Purpose of Disbursement  
SHIPPING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.44669

Date of Disbursement

/   /

Amount of Each Disbursement this Period

108.86

**B.**

Full Name (Last, First, Middle Initial)  
FEDERAL EXPRESS

Mailing Address P.O. BOX 1140

City State Zip Code  
MEMPHIS TN 38101

Purpose of Disbursement  
SHIPPING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.44643

Date of Disbursement

/   /

Amount of Each Disbursement this Period

94.15

**C.**

Full Name (Last, First, Middle Initial)  
FEDERAL EXPRESS

Mailing Address P.O. BOX 1140

City State Zip Code  
MEMPHIS TN 38101

Purpose of Disbursement  
SHIPPING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.44656

Date of Disbursement

/   /

Amount of Each Disbursement this Period

42.89

**SUBTOTAL** of Disbursements This Page (optional) .....

245.90

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 76 / 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES

**A.** Full Name (Last, First, Middle Initial)  
**INDEPENDENT PLAN COORDINATORS**

Mailing Address P.O. BOX 2899

City VIRGINIA BEACH State VA Zip Code 23450

Purpose of Disbursement  
PLAN FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.44641

Date of Disbursement

/   /

Amount of Each Disbursement this Period

972.50

**B.** Full Name (Last, First, Middle Initial)  
**IRON MOUNTAIN**

Mailing Address 745 ATLANTIC AVE

City BOSTON State MA Zip Code 02111

Purpose of Disbursement  
STORAGE FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.44644

Date of Disbursement

/   /

Amount of Each Disbursement this Period

249.13

**C.** Full Name (Last, First, Middle Initial)  
**LEXIS NEXIS**

Mailing Address P.O. BOX 7247-7090

City PHILADELPHIA State PA Zip Code 19170

Purpose of Disbursement  
DUES & SUBSCRIPTIONS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.44645

Date of Disbursement

/   /

Amount of Each Disbursement this Period

350.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1571.63

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 77 / 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)  
LPS

Mailing Address P.O. BOX 2325

City State Zip Code  
FAIRFAX VA 22031

Purpose of Disbursement  
PAC - DATA PROCESSING SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.44647

Date of Disbursement

/   /

Amount of Each Disbursement this Period

637.49

**B.**

Full Name (Last, First, Middle Initial)  
LPS

Mailing Address P.O. BOX 2325

City State Zip Code  
FAIRFAX VA 22031

Purpose of Disbursement  
PAC - DATA ENTRY SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.44657

Date of Disbursement

/   /

Amount of Each Disbursement this Period

477.65

**C.**

Full Name (Last, First, Middle Initial)  
PR NEWSWIRE

Mailing Address 810 7TH AVE 32ND FL

City State Zip Code  
NEW YORK NY 10019

Purpose of Disbursement  
MEDIA RELEASES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.44658

Date of Disbursement

/   /

Amount of Each Disbursement this Period

660.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1775.14

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 78 / 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES

<b>A.</b> Full Name (Last, First, Middle Initial) SPRINT	<b>Transaction ID:</b> SB21B.44650 <b>Date of Disbursement</b>																				
Mailing Address P.O. BOX 530503	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	8		2	0	1	0												
City ATLANTA State GA Zip Code 30353	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TELEPHONE	<table border="1"> <tr> <td colspan="10">33.70</td> </tr> </table>	33.70																			
33.70																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) VERIZON	<b>Transaction ID:</b> SB21B.44651 <b>Date of Disbursement</b>																				
Mailing Address P.O. BOX 17577	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	8		2	0	1	0												
City BALTIMORE State MD Zip Code 21297	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TELEPHONE	<table border="1"> <tr> <td colspan="10">429.59</td> </tr> </table>	429.59																			
429.59																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) DEAN VIRAG	<b>Transaction ID:</b> SB21B.44639 <b>Date of Disbursement</b>																				
Mailing Address 14039 WESTWIND LANE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	3		2	0	1	0												
City CULPEPER State VA Zip Code 22701	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement WEBSITE SUPPORT	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**963.29**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 79 / 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City  
CHANTILLYState  
VAZip Code  
20151Purpose of Disbursement  
PAC CAGING & DATA ENTRY SERVICES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.44654

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	8		2	0	1	0

Amount of Each Disbursement this Period

1084.43

SUBTOTAL of Disbursements This Page (optional) .....

1084.43

TOTAL This Period (last page this line number only) .....

8887.16

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 80 / 85

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

KELLY FOR CONGRESS

Mailing Address PO BOX 89520

City  
TUCSON

State  
AZ

Zip Code  
85752

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
KELLY FOR CONGRESS

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ District: 08

Transaction ID: SB23.44663

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....

2000.00



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 81 / 85

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	9
<input type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
WASHINGTON INTELLIGENCE BUREAU

Nature of Debt (Purpose):  
PAC CAGING & DATA ENTRY  
SERVICES

Mailing Address 4128 PEPSI PLACE

City	State	ZIP Code
CHANTILLY	VA	20151

Outstanding Balance Beginning This Period

0.00

**Transaction ID:** SD9.44667

Amount Incurred This Period

916.84

Payment This Period

0.00

Outstanding Balance at Close of This Period

916.84

**1) SUBTOTALS** This Period This Page (optional).....

916.84

**2) TOTALS** This Period (last page this line number only).....

916.84

**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

916.84

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 82 / 85

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
DIRECTECHNature of Debt (Purpose):  
CAGING AND DATA PROCESSING

Mailing Address 8595 GROVEMONT CIRCLE

City State ZIP Code  
GAITHERSBURG MD 20877

Outstanding Balance Beginning This Period

223.11

Transaction ID: SD10.4694

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

223.11

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MWM DIRECT MARKETING SERVICESNature of Debt (Purpose):  
PAC - DIRECT MAIL

Mailing Address 8048 HILLRISE COURT

City State ZIP Code  
ELKRIDGE MD 21075

Outstanding Balance Beginning This Period

2320.90

Transaction ID: SD10.4696

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2320.90

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
WASHINGTON INTELLIGENCE BUREAUNature of Debt (Purpose):  
PAC CAGING & DATA ENTRY

Mailing Address 4128 PEPSI PLACE

City State ZIP Code  
CHANTILLY VA 20151

Outstanding Balance Beginning This Period

1084.43

Transaction ID: SD10.44376

Amount Incurred This Period

0.00

Payment This Period

1084.43

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

2544.01

2) **TOTALS** This Period (last page this line number only).....

2544.01

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

2544.01

**METHOD OF ALLOCATION FOR:**

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**USE ONLY ONE SECTION, A or B****A. State and Local Party Committees****Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- \_\_\_\_\_ Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees****Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☒**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %Nonfederal.....  %

This ratio applies to (check all that apply):

Administrative ☒ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 84 / 85  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

NAME OF ACCOUNT  
 CAMPAIGN FOR WORKI-  
 NG FAMILIES

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 8 / 2 5 / 2 0 1 0

TOTAL AMOUNT TRANSFERRED

8875.00

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

8875.00

Transaction ID: H3.44666

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

8875.00

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

0.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred) .....

8875.00

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A. Full Name (Last, First, Middle Initial)**

GARY BAUER

Mailing Address

2800 SHIRLINGTON ROAD #930

City	State	Zip Code
ARLINGTON	VA	22206

Purpose of Disbursement:	Category/Type
PAC CONSULTING POLITICAL & ADMINISTRATION	

Activity or Event Identifier:  
Administrative

## Type of Allocated Activity:

- ☒ Administrative
 ☐ Fundraising
 ☐ Exempt  
☐ Voter Drive
 ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

136250.00

Date 08 / 25 / 2010

Transaction ID: H4.44659

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6250.00		6250.00		12500.00

**B. Full Name (Last, First, Middle Initial)**

BILL MOELLER

Mailing Address

2800 SHIRLINGTON ROAD #930

City	State	Zip Code
ARLINGTON	VA	22206

Purpose of Disbursement:	Category/Type
PAC CONSULTING RESEARCH WRITER	

Activity or Event Identifier:  
Administrative

## Type of Allocated Activity:

- ☒ Administrative
 ☐ Fundraising
 ☐ Exempt  
☐ Voter Drive
 ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

139000.00

Date 08 / 25 / 2010

Transaction ID: H4.44661

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1375.00		1375.00		2750.00

**C. Full Name (Last, First, Middle Initial)**

Dorie Velezis

Mailing Address

2800 S. Shirlington Road, #930

City	State	Zip Code
Arlington	VA	22206

Purpose of Disbursement:	Category/Type
PAC ACCOUNTING SERVICES	

Activity or Event Identifier:  
Administrative

## Type of Allocated Activity:

- ☒ Administrative
 ☐ Fundraising
 ☐ Exempt  
☐ Voter Drive
 ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

141500.00

Date 08 / 25 / 2010

Transaction ID: H4.44662

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1250.00		1250.00		2500.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8875.00		8875.00		17750.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
8875.00	8875.00	17750.00